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**CONFIRMATION NO. 5644** 

SERIAL NUMBER 09/809,483	FILING DATE 03/15/2001 RULE	<b>CLASS</b> 705		GROUP ART UNIT 2186 3626		ATTORNEY DOCKET NO. P-8945			
James D. Webb	Eden Prairie, MN; o, Maple Grove, MN; n, Coon Rapids, MN;								
** CONTINUING DAT THIS APPLN C	A ************************************	. <b>.</b> D/189,562	2 03/15/2000	ok.	Ln	3-2	25-C	5	
** FOREIGN APPLIC	non		Ln 3-2	25-C	5				
IF REQUIRED, FORE ** 05/18/2001	IGN FILING LICENSE	GRANT	ED 						
Foreign Priority claimed			STATE OR COUNTRY MN	DRA	SHEETS TOT DRAWING CLA 84 2		MS	INDEPENDENT CLAIMS 4	
ADDRESS GIRMA WOLDE-MICI Medtronic, Inc., MS 30 7000 Central Avenue Minneapolis ,MN 554	01 NE # 2	1758	1						
TITLE	ited and informative inte	ernet por	tal for holistic r	nanage	ment o	f patient	s with	implantable	
	EES: Authority has been given in Paper Io to charge/credit DEPOSIT ACCOUNT Io for following:				☐ All Fees				
					1.16 Fees ( Filing )				
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